

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 06, 2005
Secretary of State**

DOCUMENT# N45763

Entity Name: THE BOULEVARD 1050 CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1050 WEST GRANADA BLVD
SUITE # 1
ORMOND BEACH, FL 32174 US

New Principal Place of Business:

Current Mailing Address:

1050 W GRANADA BLVD
SUITE 1
ORMOND BEACH, FL 32174 US

New Mailing Address:

FEI Number: 59-3094456 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAOJI, MOHAN DR
1050 W GRANADA BLVD.
SUITE # 1
ORMOND BEACH, FL 32174 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MIRANTE, JOSEPH P DR.
Address: 1050 W. GRANANDA BLVD SUITE 4
City-St-Zip: ORMOND BEACH, FL 32174 US

Title: DV () Delete
Name: MUNIER, MICHAEL A DR.
Address: 1050 W. GRANADA BLVD. SUITE # 4
City-St-Zip: ORMOND BEACH, FL 32174 US

Title: STD () Delete
Name: SAOJI, MOHAN K DR.
Address: 1050 W GRANADA BLVD SUITE 1.
City-St-Zip: ORMOND BCH, FL 32174 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: STD () Change (X) Addition
Name: ALI, BABZADEH
Address: 1050 W. GRANADA BLVD. SUITE #2
City-St-Zip: ORMOND BEACH, FL 32174

Title: STD () Change (X) Addition
Name: BABAZADEH, ALI
Address: 1050 W, GRANADA BLVD. SUITE # 2
City-St-Zip: ORMOND BEACH, FL 32174

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MOHAN SAOJI

STD

03/06/2005

Electronic Signature of Signing Officer or Director

Date